

County: Dodge
CLEARVIEW NORTH
199 HOME RD

Facility ID: 2760

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JUNEAU 53039 Phone:(920) 386-3400
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/04): 125
Total Licensed Bed Capacity (12/31/04): 125
Number of Residents on 12/31/04: 95

Ownership:
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 97

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		33.7	
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		35.8	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	40.0	More Than 4 Years		30.5	
Day Services	No	Mental Illness (Org./Psy)	35.8	65 - 74	18.9			-----	
Respite Care	No	Mental Illness (Other)	30.5	75 - 84	26.3			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	9.5	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.3	Full-Time Equivalent			
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/04)			
Other Meals	No	Cardiovascular	0.0	65 & Over	60.0	-----			
Transportation	No	Cerebrovascular	3.2		-----	RNs		8.7	
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		14.5	
Other Services	No	Respiratory	0.0	-----	-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	30.5	Male	47.4	Aides, & Orderlies			
Mentally Ill	Yes	-----	-----	Female	52.6				
Provide Day Programming for			100.0		-----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care							
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Skilled Care	0	0.0	0	68	79.1	119	0	0.0	0	7	77.8	237	0	0.0	0	0	0.0	75	78.9
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	1	1.2	188	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	1.1
Traumatic Brain Inj	0	0.0	0	17	19.8	577	0	0.0	0	2	22.2	788	0	0.0	0	0	0.0	19	20.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		86	100.0		0	0.0		9	100.0		0	0.0		0	0.0	95	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	7.7	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	0.0	Bathing	4.2	47.4	48.4	95
Other Nursing Homes	21.2	Dressing	12.6	73.7	13.7	95
Acute Care Hospitals	26.9	Transferring	34.7	61.1	4.2	95
Psych. Hosp.-MR/DD Facilities	7.7	Toilet Use	21.1	52.6	26.3	95
Rehabilitation Hospitals	32.7	Eating	23.2	58.9	17.9	95
Other Locations	3.8	*****				
Total Number of Admissions	52	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	4.2		Receiving Respiratory Care	8.4
Private Home/No Home Health	40.7	Occ/Freq. Incontinent of Bladder	64.2		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	1.7	Occ/Freq. Incontinent of Bowel	38.9		Receiving Suctioning	1.1
Other Nursing Homes	10.2				Receiving Ostomy Care	5.3
Acute Care Hospitals	1.7	Mobility			Receiving Tube Feeding	5.3
Psych. Hosp.-MR/DD Facilities	8.5	Physically Restrained	25.3		Receiving Mechanically Altered Diets	48.4
Rehabilitation Hospitals	1.7					
Other Locations	13.6	Skin Care			Other Resident Characteristics	
Deaths	22.0	With Pressure Sores	3.2		Have Advance Directives	62.1
Total Number of Discharges		With Rashes	6.3		Medications	
(Including Deaths)	59				Receiving Psychoactive Drugs	85.3

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government %	Peer Group Ratio	Bed Size: 100-199 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	69.9	87.2	0.80	86.9	0.80	87.7	0.80	88.8	0.79
Current Residents from In-County	33.7	54.3	0.62	80.4	0.42	70.1	0.48	77.4	0.44
Admissions from In-County, Still Residing	11.5	25.2	0.46	23.2	0.50	21.3	0.54	19.4	0.59
Admissions/Average Daily Census	53.6	55.2	0.97	122.8	0.44	116.7	0.46	146.5	0.37
Discharges/Average Daily Census	60.8	59.6	1.02	125.2	0.49	117.9	0.52	148.0	0.41
Discharges To Private Residence/Average Daily Census	25.8	21.2	1.22	54.7	0.47	49.0	0.53	66.9	0.39
Residents Receiving Skilled Care	78.9	87.1	0.91	96.9	0.81	93.5	0.84	89.9	0.88
Residents Aged 65 and Older	60.0	87.7	0.68	92.2	0.65	92.7	0.65	87.9	0.68
Title 19 (Medicaid) Funded Residents	90.5	77.9	1.16	67.9	1.33	68.9	1.31	66.1	1.37
Private Pay Funded Residents	9.5	16.8	0.57	18.8	0.50	19.5	0.49	20.6	0.46
Developmentally Disabled Residents	0.0	0.5	0.00	0.6	0.00	0.5	0.00	6.0	0.00
Mentally Ill Residents	66.3	46.5	1.43	37.7	1.76	36.0	1.84	33.6	1.97
General Medical Service Residents	30.5	21.0	1.46	25.4	1.20	25.3	1.21	21.1	1.45
Impaired ADL (Mean)	51.6	44.6	1.16	49.7	1.04	48.1	1.07	49.4	1.04
Psychological Problems	85.3	66.5	1.28	62.2	1.37	61.7	1.38	57.7	1.48
Nursing Care Required (Mean)	9.7	8.7	1.12	7.5	1.30	7.2	1.35	7.4	1.31